

WATER-1529-0P AIR-089 800AAD		POTENTIAL HAZARDOUS WASTE SITE PRELIMINARY ASSESSMENT PART 1 - SITE INFORMATION AND ASSESSMENT		I. IDENTIFICATION 01 STATE 02 SITE NUMBER ILD 980397319	
II. SITE NAME AND LOCATION					
01 SITE NAME (Legal, common, or descriptive name of site)			02 STREET, ROUTE NO., OR SPECIFIC LOCATION IDENTIFIER		
FOX PAVING COMPANY			BY-PASS 304 ALBRIGHT RD.		
03 CITY		04 STATE	05 ZIP CODE	06 COUNTY	07 COUNTY CODE 08 CONG DIST
MONTGOMERY		IL	60538	KANE	089 15
09 COORDINATES LATITUDE		LONGITUDE		10 DIRECTIONS TO SITE (Starting from nearest public road)	
41 45 00.0		088 21 30.0		AURORA SO.-52-A	
SEE ATTACHMENT'S ON THE BACK					
III. RESPONSIBLE PARTIES					
01 OWNER (If known)			02 STREET (Business, mailing, residential)		
AURORA BLACKTOP INC.			1079 SARD AVE		
03 CITY			04 STATE	05 ZIP CODE	06 TELEPHONE NUMBER
MONTGOMERY			IL	60538	312 892 9038
07 OPERATOR (If known and different from owner)			08 STREET (Business, mailing, residential)		
09 CITY		10 STATE	11 ZIP CODE	12 TELEPHONE NUMBER	
				()	
13 TYPE OF OWNERSHIP (Check one)					
<input checked="" type="checkbox"/> A. PRIVATE <input type="checkbox"/> B. FEDERAL: _____ (Agency name) <input type="checkbox"/> C. STATE <input type="checkbox"/> D. COUNTY <input type="checkbox"/> E. MUNICIPAL <input type="checkbox"/> F. OTHER: _____ (Specify) <input type="checkbox"/> G. UNKNOWN					
14 OWNER/OPERATOR NOTIFICATION ON FILE (Check all that apply)					
<input type="checkbox"/> A. RCRA 3001 DATE RECEIVED: ____/____/____ <input type="checkbox"/> B. UNCONTROLLED WASTE SITE (CERCLA 103 c) DATE RECEIVED: ____/____/____ <input checked="" type="checkbox"/> C. NONE					
IV. CHARACTERIZATION OF POTENTIAL HAZARD					
01 ON SITE INSPECTION		BY (Check all that apply)			
<input checked="" type="checkbox"/> YES DATE 06/15/74 <input type="checkbox"/> NO MONTH DAY YEAR		<input type="checkbox"/> A. EPA <input type="checkbox"/> B. EPA CONTRACTOR <input checked="" type="checkbox"/> C. STATE <input type="checkbox"/> D. OTHER CONTRACTOR <input type="checkbox"/> E. LOCAL HEALTH OFFICIAL <input type="checkbox"/> F. OTHER: _____ (Specify)			
CONTRACTOR NAME(S): _____					
02 SITE STATUS (Check one)		03 YEARS OF OPERATION			
<input type="checkbox"/> A. ACTIVE <input checked="" type="checkbox"/> B. INACTIVE <input type="checkbox"/> C. UNKNOWN		1973 1975 BEGINNING YEAR ENDING YEAR <input type="checkbox"/> UNKNOWN			
04 DESCRIPTION OF SUBSTANCES POSSIBLY PRESENT, KNOWN, OR ALLEGED					
NONE					
05 DESCRIPTION OF POTENTIAL HAZARD TO ENVIRONMENT AND/OR POPULATION					
NONE					
V. PRIORITY ASSESSMENT					
C1 PRIORITY FOR INSPECTION (Check one. If high or medium is checked, complete Part 2 - Waste Information and Part 3 - Description of Hazardous Conditions and Incidents)					
<input type="checkbox"/> A. HIGH (Inspection required promptly) <input type="checkbox"/> B. MEDIUM (Inspection required) <input type="checkbox"/> C. LOW (Inspect on time available basis) <input checked="" type="checkbox"/> D. NONE (No further action needed, complete current disposition form)					
VI. INFORMATION AVAILABLE FROM					
01 CONTACT		02 OF (Agency/Organization)		03 TELEPHONE NUMBER	
G.H. LEIFHEIT		PRESIDENT		312 892 9038	
04 PERSON RESPONSIBLE FOR ASSESSMENT		05 AGENCY	06 ORGANIZATION	07 TELEPHONE NUMBER	08 DATE
LARRY WINNER		IEPA	HSPS	217-782-9848	11 20 84 MONTH DAY YEAR

EPA FORM 2070-12 (7-81)

MFA CODE A0403
C. Cash
7/14/84

EPA Region 5 Records Ctr.



324158



I HIGHLY VOLATILE
J EXPLOSIVE
K REACTIVE
L INCOMPATIBLE
M NOT APPLICABLE



WATER 1529-01

POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT

PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE 02 SITE NUMBER

ILD 980397319

II. HAZARDOUS CONDITIONS AND INCIDENTS

01 ☐ A GROUNDWATER CONTAMINATION

03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE _____)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL☐ ALLEGED01 ☐ B SURFACE WATER CONTAMINATION

03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE _____)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL☐ ALLEGED01 ☐ C CONTAMINATION OF AIR

03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE _____)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL☐ ALLEGED01 ☐ D FIRE/EXPLOSIVE CONDITIONS

03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE _____)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL☐ ALLEGED01 ☐ E DIRECT CONTACT

03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE _____)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL☐ ALLEGED01 ☐ F CONTAMINATION OF SOIL03 AREA POTENTIALLY AFFECTED: _____
(Acres)02 ☐ OBSERVED (DATE _____)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL☐ ALLEGED01 ☐ G DRINKING WATER CONTAMINATION

03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE _____)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL☐ ALLEGED01 ☐ H WORKER EXPOSURE/INJURY

03 WORKERS POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE _____)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL☐ ALLEGED01 ☐ I POPULATION EXPOSURE/INJURY

03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE _____)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL☐ ALLEGED



POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE 02 SITE NUMBER

ILLD 980397319

II. HAZARDOUS CONDITIONS AND INCIDENTS (Continued)

01 ☐ J. DAMAGE TO FLORA
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE _____) ☐ POTENTIAL ☐ ALLEGED

01 ☐ K. DAMAGE TO FAUNA
04 NARRATIVE DESCRIPTION (Include name(s) of species)

02 ☐ OBSERVED (DATE _____) ☐ POTENTIAL ☐ ALLEGED

01 ☐ L. CONTAMINATION OF FOOD CHAIN
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE _____) ☐ POTENTIAL ☐ ALLEGED

01 ☐ M. UNSTABLE CONTAINMENT OF WASTES
(Spills runoff standing liquids leaking drums)

03 POPULATION POTENTIALLY AFFECTED _____

02 ☐ OBSERVED (DATE _____) ☐ POTENTIAL ☐ ALLEGED

04 NARRATIVE DESCRIPTION

01 ☐ N. DAMAGE TO OFFSITE PROPERTY
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE _____) ☐ POTENTIAL ☐ ALLEGED

01 ☐ O. CONTAMINATION OF SEWERS, STORM DRAINS, WWTPs
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE _____) ☐ POTENTIAL ☐ ALLEGED

01 ☐ P. ILLEGAL/UNAUTHORIZED DUMPING
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE _____) ☐ POTENTIAL ☐ ALLEGED

05 DESCRIPTION OF ANY OTHER KNOWN, POTENTIAL, OR ALLEGED HAZARDS

III. TOTAL POPULATION POTENTIALLY AFFECTED: _____

IV. COMMENTS

V. SOURCES OF INFORMATION (Cite specific references, e.g. state files, sample analysis, reports)

EPA WATER FILE'S

EXECUTIVE SUMMARY

Fox Paving Company Bypass 30 and Albright Road, Montgomery, Illinois 60538, Kane County, Lat. 41°-45'-00", Long. 088°-21'-30". Aurora So.-52-A.
Owned by: Aurora Blacktop, Inc., 1079 Sard Avenue, Montgomery, Illinois 60538 (312) 892-9038. Person to contact: Mr. G. H. Leifheit, President.

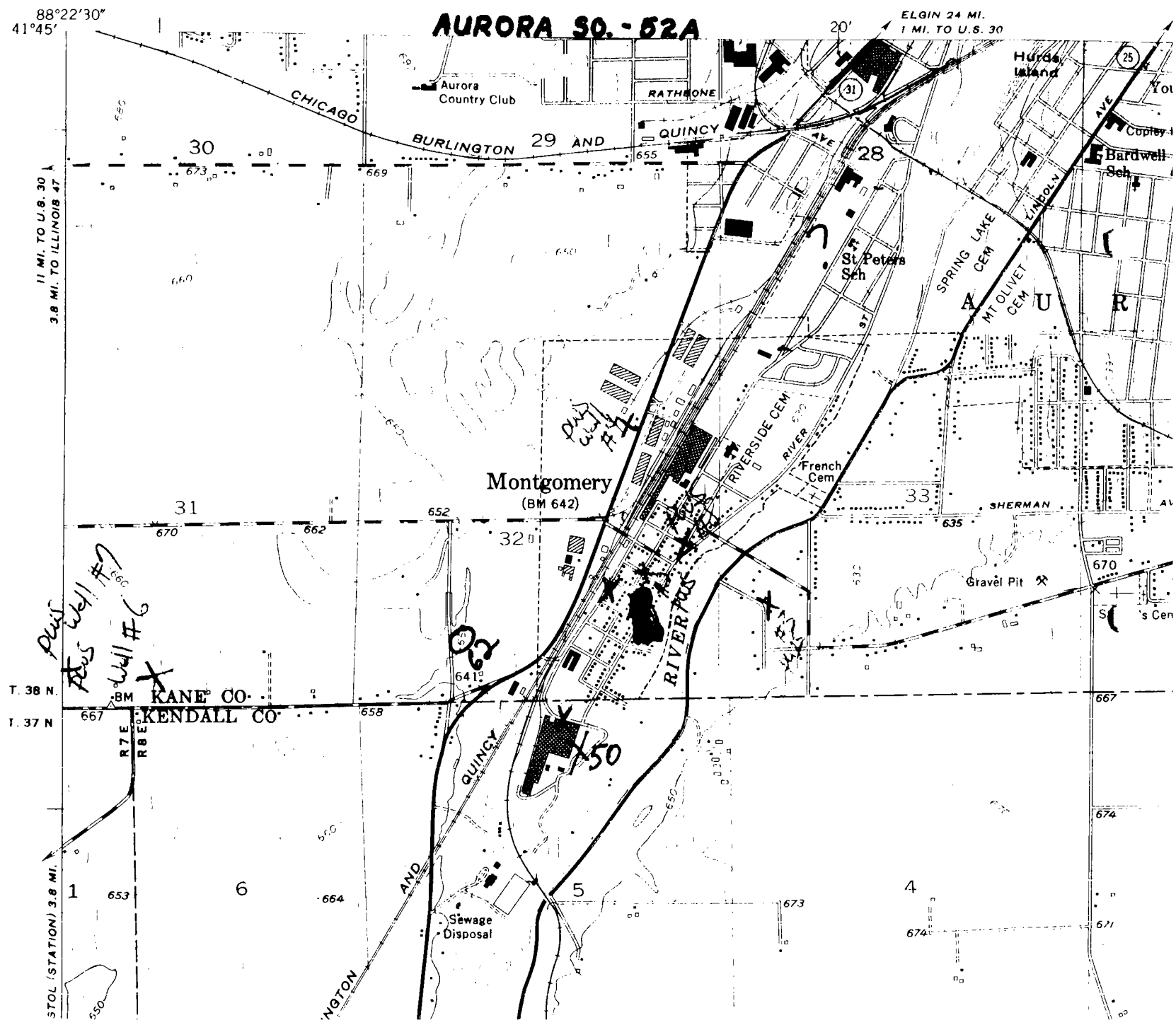
This facility was an asphalt plant which operated approximately five months out of the year. They were permitted to operate an air scrubber waste water treatment facility with no discharge to the water of the State. The water from the scrubber emptied into a settling pond on site, then was recycled through the asphalt plant. The pond was approximately 100' x 200' in size. The material extracted from the washing process was removed from the settling pond and disposed of in a sanitary landfill. Because of the steam evaporation, approximately 3,000 gallons of water was used per day. On April 4, 1975 Mr. G. W. Prosser and Son Asphalt Co., Shelbyville, Illinois 62565 (217) 774-5032. Purchased the asphalt plant from Aurora Blacktop Co. and moved the facility.

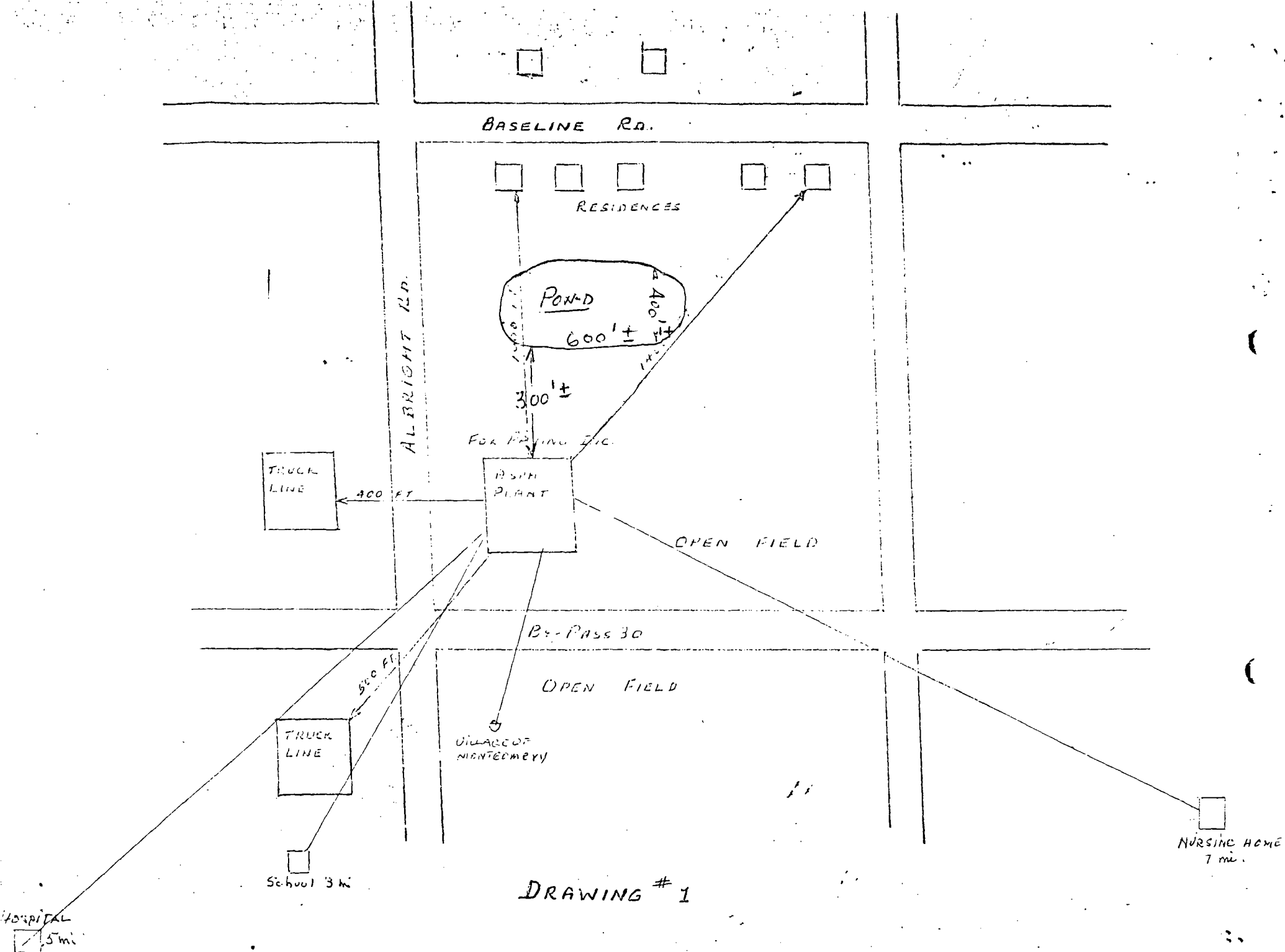
There is no evidence of hazardous waste disposal at this site, and this Agency recommends a none priority assessment for this site.

LW:jk/sp/2546d,14

(GENEVA 1:62500)

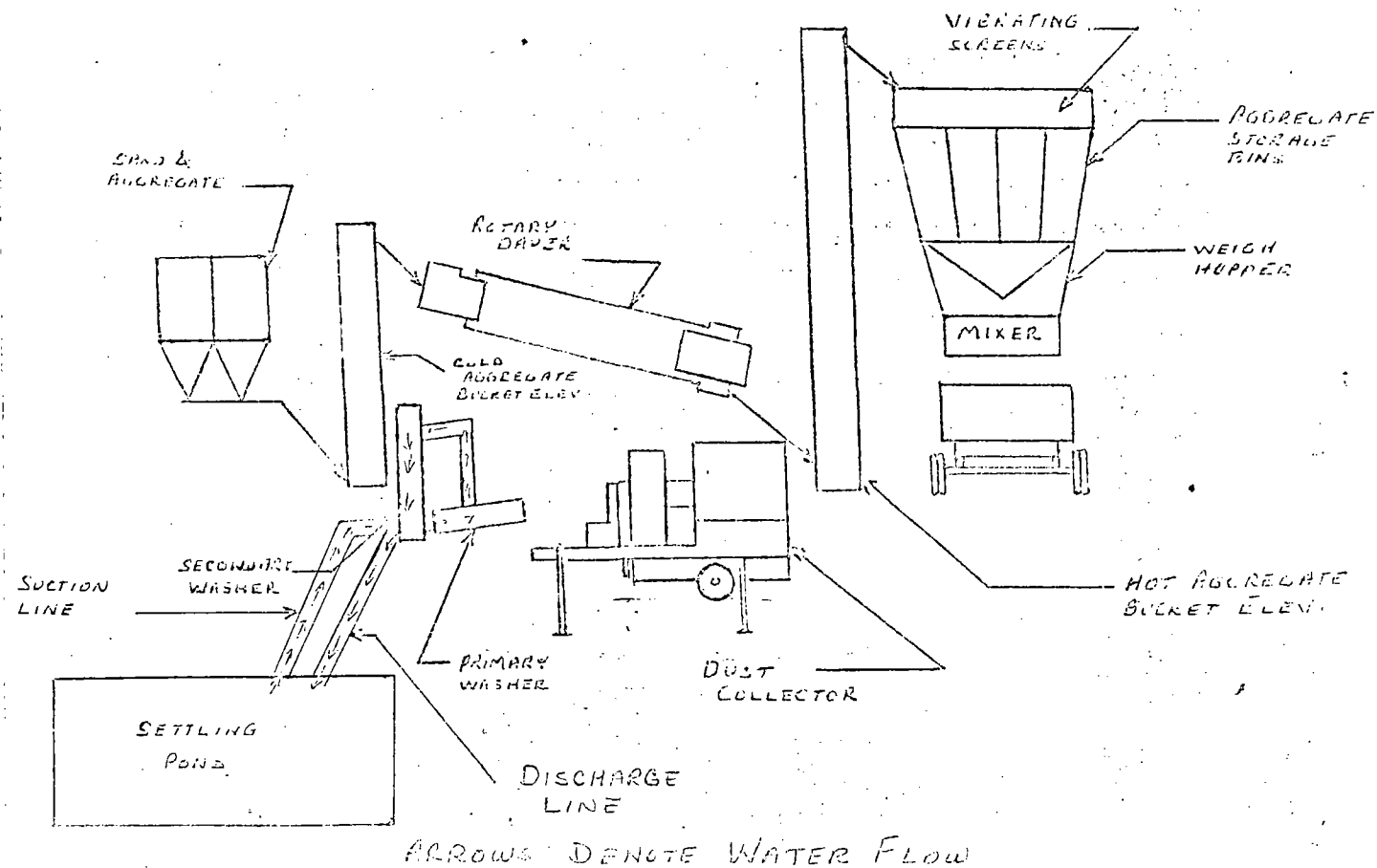
ELGIN 24 MI.
1 MI. TO U.S. 30





DRAWING #2

Recd 3-14 '13



DRAWING #2

Recd 7-9-73

